

WINDLESHAM PARISH COUNCIL

COMMUNITY PRIDE GRANT APPLICATION FORM

Please complete all details in BLOCK CAPITALS

Name of Organisation/Group	
Contact Name	
Position within the organisation/group	
Telephone number	
Address of organisation/group	
Postcode	
Email address	
For what purpose/project is the grant requested?	
What is the evidence/need for the purpose/project?	
Total cost of purpose/project	£
Amount of grant requested:	£

Signed
Name
Position in organisation
Date
Name of Councillor supporting your application
Supporting Councillors Signature

NB. If your bid is successful you will need a nominated bank account to receive the funds. If

The Council Office, The Avenue, Lightwater, GU18 5RG or to one of the Parish Councillors.

The completed form should be returned to The Clerk to Windlesham Parish Council,

you have any queries please contact clerk@windleshampc.gov.uk.

Statement of understanding: I have read and understood Windlesham Parish Council's Grant Awarding Policy and if our application is successful, we agree to abide by the

For official use

conditions:

Date Received	
Date of Council meeting	
Council decision	Fund / Fund in part / Reject
Amount to be funded	£
Date of notification of decision	
Minute number	